



**MEETING OF THE HEALTH BENEFITS COMMITTEE OF THE RETIREMENT BOARD
OF THE COUNTY EMPLOYEES' AND OFFICERS' ANNUITY AND BENEFIT FUND
OF COOK COUNTY AND EX OFFICIO FOR THE FOREST PRESERVE DISTRICT
EMPLOYEES' ANNUITY AND BENEFIT FUND OF COOK COUNTY
33 N Dearborn St, Suite 1000
Chicago, Illinois 60602**

Minutes for the June 25, 2015 Meeting

The County Employees' and Officers' Annuity and Benefit Fund of Cook County and the Forest Preserve District Employees' Annuity and Benefit Fund of Cook County Fund are herein collectively referred to as the "Fund." **All committee recommendations are preliminary in nature; as such, they are subject to review and approval by the full Retirement Board.**

Call to Order and Roll Call.

Trustee Committee Members Present: John Fitzgerald (Chair), Patrick McFadden, Diahann Goode
Brent Lewandowski, Sam Richardson, Alexis Herrera, and
Patrick Nester
Non-Committee Trustees Present: Lawrence Wilson
Staff Present: Nickol Hackett, Executive Director; Staff: Brenda Deming,
Rachelle Howliet, and Tonya Jackson
Others Present: Jessica Streit and John Gingell of Segal Consulting, Scott
Behnke, Mary Beth Billie, and Theresa Smith of
UnitedHealthcare and OptumHealth.

Public Comment.

Trustee Fitzgerald asked if anyone present would like to address the Committee. There being no public comment, the meeting continued.

1. Review and Consideration of the April 23, 2015 Health Benefits Committee Meeting Minutes.

It was moved by Trustee Richardson and seconded by Trustee Nester to approve the minutes.

2. Administrative Report

Ms. Deming reported that the UHC summary plan descriptions are completed and will be mailed to member homes in the next few weeks. She then gave a short presentation on the Fund's Wellness Screening event, including the format, participation by 46 members, and generally positive feedback.

She provided a profile of a member that attended, and the health behavior changes the member has made in the past year which resulted in health improvements. Trustee Fitzgerald attended the screening and indicated that he felt the information received was very valuable and that the event was well organized and enjoyable. It was noted that the pilot program cost was approximately \$9,800, which was paid by UHC through the Fund's annual wellness credit.

3. Preliminary Review of Clinical Programs

Mary Beth Billie, Director of Clinical Operations, discussed the services that OptumHealth nursing staff provides to the Fund. These services include disease management, reminders for gaps in care, the Nurseline, and telephonic wellness coaching programs. In the first 3 months of 2015, telephonic clinical programs had reached 4.9% of members. Ms. Billie attributed the strong levels of activity to members having a direct phone number to the nursing staff, and a successful transition from the Alere diabetes management program.

Theresa Smith, a nurse having direct contact with Fund members, shared a success story of interaction with a member on several health issues. She was able to detect a breathing problem the member was having, contact his doctor, then his pharmacy, and assist him in getting the proper medication for the situation. The Trustees asked several questions on access to this type of service and whether staff could refer a member and how members are selected for outreach. Ms. Billie explained that UHC performs data mining on all available member information, including integration of pharmacy data and claims data. From this, they are able to find treatment gaps in care, particular disease states and other information from which they determine which members would benefit from a nurse outreach call.

4. Preliminary Review of Claims reporting

Scott Behnke provided a preliminary review of financial and plan performance reporting. Though the data was for only the first three months of the contract, he presented the highlights of the analysis and benchmarking that UHC is able to perform using illustrative reports. He explained that this type of analysis is done as part of the annual plan review, and can be used as a basis for strategic planning on various member health initiatives such as preventive screening services or plan design changes.

Trustee McFadden requested additional clarification on the amounts that members pay toward services as they receive them, which were referred to as 'benefits adequacy' in the report. It was agreed that additional information would be provided at the next meeting. The Trustees also requested a midyear review of plan expense for both medical and pharmacy plans.

5. Adjournment

It was moved by Trustee Goode and seconded by Trustee Lewandowski to adjourn the meeting.